

Message Text

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C O N F I D E N T I A L SECTION 01 OF 03 GENEVA 10701

PASS TO DR J. BRYANT, HEW/OIH, ROCKVILLE

E.O.11652: ADS, DECLAS 12/31/78
TAGS: WHO UR XG SWEL
SUBJECT: PREPARATIONS FOR WHO/UNICEF ALMA ATA CONFERENCE
ON PRIMARY HEALTH CARE

1. SUMMARY: SOVIETS ARE APPLYING CONSIDERABLE PRESSURE
ON WHO IN AN ATTEMPT TO INFLUENCE THE OUTCOME OF THE
SEPTEMBER ALMA ATA CONFERENCE ON PRIMARY HEALTH CARE.
AN ABSTRACT OF THE 30 PAGE SOVIET "FINAL DOCUMENT" OF
THE CONFERENCE IS PRESENTED, TOGETHER WITH THE COMMENTS
OF THE SECRETARIAT. THE IMPORTANCE OF THOROUGH USDEL
PREPARATION IS STRESSED AND SOME CONFERENCE LOGISTICS ARE
CLARIFIED.

2. E. LEPARSKY OF THE USSR HAS BEEN ASSIGNED FULL TIME TO
WHO FROM MOSCOW TO ASSIST THE SECRETARIAT IN THE FINAL
PREPARATIONS FOR THE ALMA ATA CONFERENCE SEPTEMBER 6-12.
LEPARSKY, WHO IS SAID TO BE A FORMER MILITARY OFFICER, HAS
BEEN WORKING VERY CLOSELY WITH THE SOVIET MISSION IN
GENEVA, AND HAS BEEN EXERTING CONSIDERABLE PRESSURE ON
THE SECRETARIAT STAFF IN CHARGE OF DRAFTING PRELIMINARY
CONFERENCE PAPERS. OTHER RUSSIANS IN THE SECRETARIAT,
SPECIFICALLY DR POUSTOVOI OF THE DIVISION OF NON COMMUNIC-
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ABLE DISEASES, HAVE ALSO BEEN ACTIVELY LOBBYING FOR THE
SOVIET VIEWPOINT ON THE CONFERENCE.

3. LEPARSKY'S MAIN FRAME OF REFERENCE IS A 30 PAGE
DOCUMENT ENTITLED "FINAL (SIC) DOCUMENT OF THE WHO/UNICEF
INTERNATIONAL CONFERENCE ON PRIMARY HEALTH CARE",
APPARENTLY PREPARED BY DR D.VENEDIKTOV, SOVIET DEPUTY

MINISTER OF HEALTH. THIS DOCUMENT, THOUGH NOT AVAILABLE AS SUCH TO THE MISSION, HAS BEEN OBTAINED IN PART, INCLUDING SOME INDICATIONS OF DG MAHLER'S REACTIONS TO CERTAIN SECTIONS.

4. SOVIET DOCUMENT IS DIVIDED INTO 10 SECTIONS, TITLED AS FOLLOWS:

I. PREAMBLE

II. THE PROTECTION AND STRENGTHENING OF HEALTH - AN INALIENABLE HUMAN RIGHT AND THE MOST IMPORTANT SOCIAL OBLIGATION OF GOVERNMENTS

III. THE CREATION OF COMPREHENSIVE NATIONAL HEALTH CARE SYSTEMS - THE BASIC WAY TO PROTECT AND STRENGTHEN HUMAN HEALTH

IV. THE MOST IMPORTANT FIELD OF WORK OF NATIONAL HEALTH SYSTEMS - PRIMARY HEALTH CARE

V. BASIC LINES OF ACTION IN P.H.C.

VI. BASIC PREREQUISITES FOR THE SUCCESSFUL DEVELOPMENT OF PHC

VII. ?

VIII. SOCIAL AND ECONOMIC DEVELOPMENT OF SOCIETY

IX. INTERNATIONAL TECHNICAL COOPERATION BY WHO

X. RECOMMENDATIONS (5 PAGES)

5. EXCERPTS FROM SOVIET DOCUMENT FOLLOW, KEYED TO SECTION HEADINGS ABOVE:

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II. A) "... GROWTH OF CONSCIOUSNESS OF THE MASSES"

B) "HEALTH SYSTEMS AND SERVICES IN A NUMBER OF ECONOMICALLY DEVELOPED COUNTRIES, WHICH ARE DEVELOPING IN A SPONTANEOUS AND UNPLANNED WAY, BASED ON PRIVATE PRACTICE, AND OFTEN ARTIFICIALLY TRANSFERRED TO HEALTH CARE IN DEVELOPING COUNTRIES, HAVE SHOWN THEMSELVES INCAPABLE OF SOLVING THE PROBLEM OF PROTECTING THE HEALTH OF THE PEOPLE OF THE COUNTRIES."

III. A) "A CENTRALLY PLANNED COMPREHENSIVE NATIONAL HEALTH SYSTEM IS THE ONLY ONE CAPABLE OF PROVIDING FULL HEALTH."

B) "...PRIMARY RESPONSIBILITY OF THE STATE"
(MAHLER'S VIEW EMPHASIZES SELF RELIANCE IN PHC, WITH PLANNING AND DEVELOPMENT FROM THE BOTTOM UP, WITH SUPPORT FROM ABOVE.)

C) NEED FOR FULL DEVELOPMENT OF DOCUMENTATION,

SERVICES AND RESEARCH AT "HIGHEST POSSIBLE LEVEL
OF SKILL" (MAHLER'S VIEW STRESSES THAT PHC
INVOLVES WHAT CAN BE DONE NOW BY LDC'S)

IV. A) "INsofar AS PHC REPRESENTS THE PRIMARY CONTACT
BETWEEN NATIONAL HEALTH SERVICES (AS A FUNCTIONAL
SOCIAL SYSTEM) AND THE INDIVIDUAL (COMMUNITY), IT
IS AN AREA WHERE THE INTERESTS AND NEEDS OF THE
SYSTEM AND THE INDIVIDUAL MEET"

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B) OBLIGATION OF SOCIETY IS "TO TRY CONSTANTLY TO
INCREASE THE SUM OF KNOWLEDGE" (MAHLER'S VIEW: TRUE,
BUT MISSES THE POINT OF PHC)

V. A) "PHC IS THE FIRST STAGE OF A COMPREHENSIVE HEALTH
SERVICE" (TARIMO AND AFRICAN NATIONS DISAGREE)

VI. A) "THE CREAT OF A SYSTEM OF PRIMARY MEDICAL CARE
AND A GENERAL HEALTH CARE SYSTEM COULD NOT BE EN-
VISAGED MERELY AS A PERIPHERAL OBJECTIVE AND COULD
NOT BE ENTRUSTED TO LOCAL INHABITANTS OR COMMUNITIES
ALONE" (MAHLER'S VIEW IS THAT PHC IS COMMUNITY
RESPONSIBILITY WITH GOVERNMENT SUPPORT)

B) "THE NUCLEUS OF A MODERN HEALTH SERVICE IN BOTH
URBAN AND RURAL AREAS SHOULD BE THE PHYSICIAN, WHO
ACCORDING TO WHO DEFINITION HAS ACQUIRED THE REQUI-
SITE QUALIFICATIONS TO BE LEGALLY LICENSED..."

(WHO FEELS THIS EMPHASIS ON PHYSICIANS IS INAPPROPRIA-

TE FOR LDC'S, WHERE HIS ROLE IS TO TEACH, LEAD BY
EXAMPLE AND PROVIDE HIGHLY SKILLED REFERRAL SERVICES)

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C) APPROPRIATE TECHNOLOGY "DOES NOT MEAN RUDIMENTARY
INSTRUMENTS OR MEDICINAL SUBSTANCES BUT A COM-
PREHENSIVE COLLECTION OF INSTRUMENTS, EQUIPMENT,
SUPPLIES, ETC., BASED ON SOUND SCIENTIFIC PRINCIPLES."
MAHLER'S VIEW: START WITH AT LEAST THE BASICS AND
ADAPT LOW COST TECHNOLOGY)

D) "THE CONFERENCE PARTICIPANTS HAD AN OPPORTUNITY
TO SEE A HIGHLY DEVELOPED SYSTEM OF PHC IN OPERATION
IN URBAN AND RURAL AREAS....EXPRESSED GRATITUDE....
FOR A STRIKING DEMONSTRATION OF A PHC MODEL THAT
HAS ENABLED THE PEOPLES..... TO ATTAIN A HIGH LEVEL
OF HEALTH."

VIII. A) THE CONFERENCE "EMPHASIZED THAT THE STATE'S
OWN FUNDS AND RESOURCES WERE OF PARAMOUNT IMPORTANCE,
AS OPPOSED TO OTHER SOURCES OF FUNDS, INCLUDING
FINANCIAL PARTICIPATION OF THE POPULATION...."
(MAHLER'S VIEW EMPHASIZES HUMAN, MATERIAL AND
FINANCIAL RESOURCES OF THE COMMUNITY, WITH BUDGETARY
SUPPORT FROM HIGHER LEVELS)

IX. DISARMAMENT MEASURES SHOULD BE SUPPORTED TO MAKE
IT POSSIBLE TO INTENSIFY HEALTH ASSISTANCE...

X. RECOMMENDATIONS

A) "TO CONSIDER PHC AS AN IMPORTANT ELEMENT....."
(WHO WOULD GIVE STRONGER EMPHASIS)

B) "TO ADOPT LEGAL MEASURES TO REGULATE...."
(WHO: WHY SUCH EMPHASIS?)

C) "TO INCLUDE PHC IN NATIONAL PLANS" AND PROVIDE
FUNDS "LARGELY OUT OF WHAT THE STATE ITSELF CAN
PROVIDE" (WHO STRESSES COMMUNITY RESOURCES AND

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INITIATIVES)

6. DG MAHLER AND OTHERS OF HIS TOP STAFF FIND MUCH OF
THE SOVIET REPORT OFFENSIVE AND TOTALLY OUT OF STEP
WITH WHO THINKING ON PRIMARY HEALTH CARE. THEY FEAR
THAT THE SOVIETS, FROM THEIR POSITION OF STRENGTH AS

HOST COUNTRY, WILL TEND TO DOMINATE THE ATTITUDE OF THE THIRD WORLD COUNTRIES BY A BLITZKRIEG OF PROPAGANDA, INCLUDING FIELD TRIPS AND EXHIBITS. IT IS FELT TO BE FAIRLY CERTAIN ALSO THAT A SOVIET, EITHER VENEDIKTOV, PETROFF OR PERHAPS THE MINISTER OF HEALTH OF KAZAKHSTAN, WILL BE ELECTED PRESIDENT OF THE CONFERENCE AND THUS INCREASE THE RUSSIAN VISIBILITY AND INFLUENCE.

7. CONCERNS HAVE BEEN VOICED THAT WESTERN COUNTRIES, INCLUDING THE US, WILL NOT TAKE A SUFFICIENTLY STRONG STAND ALONG THE LINES OF THE JOINT WHO/UNICEF REPORT AND THAT THE LEADERSHIP INITIATIVE WILL THUS GO BY DEFAULT TO THE SOVIETS.

8. THE SECRETARIAT EXPECTS THE FOLLOWING DOCUMENTS TO EMERGE FROM THE CONFERENCE: A) "THE DECLARATION OF ALMA ATA", A BRIEF STATEMENT OF BROAD PRINCIPLES OF PHC, B) REPORTS OF THE THREE WORKING COMMITTEES AND C) A FINAL REPORT OF THE CONFERENCE ITSELF, WITH RECOMMENDATIONS THE SECRETARIAT STAFF ARE NOW ENGAGED IN DRAFTING A DISCUSSION OUTLINE FOR EACH COMMITTEE WHICH WILL BE APPROPRIATELY MODIFIED BY THE CONFERENCE DELIBERATIONS.

9. IN VIEW OF THE IMPORTANCE OF THE FINAL RECOMMENDATIONS OF THIS CONFERENCE FOR FUTURE WHO POLICY DIRECTION IN PHC, THE USDEL, WHEN SELECTED, SHOULD GIVE CAREFUL THOUGHT TO DEVELOPING A STRONG POSITION WHICH WOULD PROVIDE GUIDANCE AND ASSISTANCE TO THE THIRD WORLD COUNTRIES. IN THIS

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CONNECTION, THE CHIEF OF THE USDEL SHOULD REMAIN TO THE

END OF THE CONFERENCE TO PROVIDE LEADERSHIP IN THE FORMULATION OF THE FINAL RECOMMENDATIONS.

10. AS FURTHER ELABORATION ON THE PROVISIONAL AGENDA: ON THE OPENING DAY, AFTER THE USUAL FORMALITIES AND THE ELECTION OF OFFICERS, DR MAHLER WILL BE PRESENTING AN OPENING STATEMENT, TO BE FOLLOWED BY STATEMENTS BY INDIVIDUAL COUNTRIES. DISCUSSION WILL BE STRICTLY LIMITED TO FIVE MINUTES BY EACH COUNTRY. IF NECESSARY, DISCUSSION WILL GO ON TO AN EVENING SESSION ON THE FIRST DAY. THE USSR IS ALSO EXPECTED TO HOST THEIR MAJOR RECEPTION ON WEDNESDAY EVENING SEPTEMBER 6.

11. THE ANNOTATED AGENDA DOES NOT INDICATE ACTIVITIES AFTER SEPTEMBER 8. THE RUSSIAN HOSTS ARE EXPECTED TO PROVIDE FIELD TRIPS TO THE DELEGATES OVER THE WEEKEND. THE REPORTS OF COMMITTEES A, B AND C WILL BE DRAFTED OVER THE WEEKEND, PRESENTED TO THE COMMITTEES AND THEN SUBMITTED TO THE PLENARY ON MONDAY SEPTEMBER 11, IF TIME PERMITS. THE CLOSING CEREMONY WILL BE ON TUESDAY SEPTEMBER

12. VANDEN HEUVEL
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